PERRY COUNTY, ILLINOIS APPLICATION FOR VOTE BY MAIL BALLOT

Applicant's Full Name			For Election Authority's Use Only	
Street Address		1	Ballot Style:	
Street Address		4	Voter ID:	
City, State, Zip				
County	Perry		For Election	Judge's Use Only
Date of Birth*		1	Initials:	
Date of Birtin		-	Voter's	
Phone Number*			Consecutive Number:	
To be voted at the	Consolidated Election			
Date of Election	April 6, 2021			
Precinct		1		
days or more preceding this ele- wish to vote by absentee ballot. I hereby make application	the address specified above, in the stated pection, that I am lawfully entitled to vote in tion for an official ballot or ballots to be voted ssuing the same prior to the closing of the	such precir	nct at said election to such election, and I ag	be held therein, and th

shall return such eturned by mail, postmarked no later than midnight preceding election day, for counting no later than during the period for counting provisional ballots, the last day of which is the 14th day following election day.

Under penalties as provided by law pursuant to 10 ILCS 5/29-10, the undersigned certifies that the statements set forth in this application are true and correct.

Signature of Applicant	Today's Date	
Address to which ballot should be mailed: (if different from above)		

IMPORTANT:

You must return the completed and signed application to the election authority with jurisdiction over your registration.

Mail To:

John Batteau **Perry County Clerk PO Box 438** Pinckneyville, IL 62274